

Application Data Sheet

Application Information

Application number:: 10686551
Filing Date:: 10/14/03
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??::
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)::
Number of copies of CRF::
Title:: METHOD AND APPARATUS FOR RENDERING SHADOWS
Attorney Docket Number:: 021751-001710US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 25
Small Entity?:: No
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Thomas
Middle Name:: David
Family Name:: Lokovic
Name Suffix::
City of Residence:: Richmond
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 5016 Buckboard Way
City of Mailing Address:: Richmond
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94803

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Eric
Middle Name:: Hugh
Family Name:: Veach
Name Suffix::
City of Residence:: Mountain View
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1123 Doyle Place
City of Mailing Address:: Mountain View
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 94040

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::
This Application Continuation of 09/619,064 07/19/00

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name:: Pixar
Street of mailing address:: 1200 Park Avenue
City of mailing address:: Emeryville
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94608